

## **SUPPLEMENTAL APPLICATION DATA SHEET**

### **Application Information**

Application Number:: 10/551,205

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: ORAL FORMULATIONS OF CLADRIBINE

Attorney Docket Number:: 0056192-000024

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 1

Small Entity?:: No

**Latin Name::**

**Variety Denomination Name::**

**Petition Included?::** No

**Petition Type::**

**Licensed US Govt. Agency::**

**Contract or Grant Numbers::**

**Secrecy Order in Parent Appl.?::** No

### **Applicant Information**

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** United States

**Status::** Full Capacity

**Given Name::** Nicholas

**Middle Name::** S.

**Family Name::** BODOR

**Name Suffix::**

**City of Residence::** Bal Harbour

**State or Province of Residence::** Florida

**Country of Residence::** United States

**Street of Mailing Address::** 10225 Collins Avenue  
Unit 1002/1004

**City of Mailing Address::** Bal Harbour

**State or Province of Mailing**

Address::

Country of Mailing Address:: United States

Postal or Zip Code of Mailing Address:: 33154

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Great Britain

Status:: Full Capacity

Given Name:: Yogesh

Middle Name::

Family Name:: DANDIKER

Name Suffix::

City of Residence:: Toronto

State or Province of Residence::

Country of Residence:: Canada

Street of Mailing Address:: 57 Fenn Avenue

City of Mailing Address:: Toronto

State or Province of Mailing Address::

Country of Mailing Address:: Canada

Postal or Zip Code of Mailing Address:: M2L 1M9

## **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

## **Representative Information**

Representative Customer Number:: 21839

## **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/US2004/009387	March 26, 2004
PCT/US2004/009387	Claims benefit under 35 U.S.C. §119(e) of	60/458,922	March 28, 2003
PCT/US2004/009387	Claims benefit under 35 U.S.C. §119(e) of	60/484,756	July 2, 2003
PCT/US2004/009387	Claims benefit under 35 U.S.C. §119(e) of	60/541,247	Feb 4, 2004

## **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
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## **Assignee Information**

<b>Assignee Name::</b>	ARES TRADING S.A.
<b>Street of Mailing Address::</b>	Zone Industrielle D L'Ouriettaz
<b>City of Mailing Address::</b>	Aubonne
<b>State or Province of Mailing Address::</b>	
<b>Country of Mailing Address::</b>	Switzerland
<b>Postal or Zip Code of Mailing Address::</b>	CH-1170